

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type::

Continuation-in-Part

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

COMPOSITIONS AND METHODS FOR THE  
DETECTION, DIAGNOSIS AND THERAPY OF  
HEMATOLOGICAL MALIGNANCIES

Attorney Docket Number::

14058-013520US

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

9

Small Entity?::

No

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Austria  
Status:: Full Capacity  
Given Name:: Alexander  
Middle Name::  
Family Name:: Gaiger  
Name Suffix::  
City of Residence:: Seattle  
State or Province of Residence:: Washington  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 1421 42nd Avenue, E.  
City of Mailing Address:: Seattle  
State or Province of mailing address:: Washington  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 98112

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United Kingdom  
Status:: Full Capacity  
Given Name:: Paul  
Middle Name:: A.  
Family Name:: Algate  
Name Suffix:: Ph.D.  
City of Residence:: Issaquah  
State or Province of Residence:: Washington  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 580 Kalmia Pl., NW  
City of Mailing Address:: Issaquah  
State or Province of mailing address:: Washington

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Country of mailing address:: U.S.A.

Postal or Zip Code of mailing address:: 98027

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Jane

Middle Name::

Family Name:: Mannion

Name Suffix:: Ph.D.

City of Residence:: Edmonds

State or Province of Residence:: Washington

Country of Residence:: U.S.A.

Street of Mailing Address:: 8904 192nd Street, SW

City of Mailing Address:: Edmonds

State or Province of mailing address:: Washington

Country of mailing address:: U.S.A.

Postal or Zip Code of mailing address:: 98026

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Marc

Middle Name::

Family Name:: Retter

Name Suffix:: Ph.D.

City of Residence:: Carnation

State or Province of Residence:: Washington

Country of Residence:: U.S.A.

Street of Mailing Address:: 33402 NE 43rd Place  
 City of Mailing Address:: Carnation  
 State or Province of mailing address:: Washington  
 Country of mailing address:: U.S.A.  
 Postal or Zip Code of mailing address:: 98014

### Correspondence Information

Correspondence Customer Number:: 20350

### Representative Information

Representative Customer Number:: 20350

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/796,692	03/01/01
which application	claims the benefit of	60/223,378	08/07/00
which application	claims the benefit of	60/223,416	08/04/00
which application	claims the benefit of	60/222,903	08/03/00
which application	claims the benefit of	60/218,950	07/14/00
which application	claims the benefit of	60/206,201	05/22/00
which application	claims the benefit of	60/202,084	05/04/00
which application	claims the benefit of	60/200,999	05/01/00
which application	claims the benefit of	60/200,303	04/28/00
which application	claims the benefit of	60/200,779	04/28/00
which application	claims the benefit of	60/200,545	04/27/00
which application	claims the benefit of	60/190,479	03/17/00
which application	claims the benefit of	60/186,126	03/01/00

### Foreign Priority Information

Country::	Application number::	Filing Date::
PCT	01/07272	03/01/01

### Assignee Information

Assignee Name::	Corixa Corporation
Street of mailing address::	1124 Columbia Street, Suite 200
City of mailing address::	Seattle
State or Province of mailing address::	Washington
Country of mailing address::	U.S.A.
Postal or Zip Code of mailing address::	98104

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